# CENTRAL STATE HOSPITAL LOCAL HUMAN RIGHTS COMMITTEE MEETING

Central State Hospital
26317 W. Washington Street
Building 113, Main Conference Room
Petersburg, Virginia 23803
April 7, 2006
8:30 a.m.

## Attendance:

Chana Ramsey, Chair; Violet Hite, Vice-Chair; Isabel Vartanian, Member; Cleveland Rodgers, Member; Linda Masri, Member, and Betty Velez, Member.

## **Guests:**

Jennifer Barker, Patient Rights Coordinator/CSH; Michael Curseen, Human Rights Program Supervisor/Office of Human Rights; Tonya Cunningham, Human Rights Advocate Senior/Office of Human Rights; Dr. Ronald Forbes, CSH Medical Director; Jim Bell, Forensic Unit Director; Joyce Grecco, Assistant Director of Nursing; and Rose Mitchell, Executive Secretary/Office of Human Rights.

# Absent:

None

- I. Call to Order: 8:40 am
- II. Minutes of March 3, 2006, Meeting

Minutes were approved without comment by the Committee.

## **III. Public Comment**

None

# IV. New Business

#### (Executive Session)

The committee approved a Motion to move into Executive session pursuant to VA Code 2.2-3711 (A), Paragraph 15, for the protection of the privacy of individuals and their records in personal matters not related to public business.

The following subject matter was discussed in Executive Session:

**Monthly Abuse Summary: February 2006** 

Behavioral Review – G.M Formal Human Rights Complaints – March 2006 Spit Mask Usage – March 2006

## (Return to Open Session)

Upon reconvening in open session, the Central State Hospital Local Human Rights Committee certified that to the best of each member's knowledge, only public business matters lawfully exempt from statutory open meeting requirements, and only public business matters identified in the motion to convene the closed session were discussed in closed session

- A. Monthly Abuse Summary: February 2006 Presented by Jennifer Barker A motion was made and unanimously passed to accept Ms. Barker's report.
- B. Behavioral Review G.M. Presented by Dr. Forbes A motion was made and unanimously passed to accept Dr. Forbes' behavior review of G. M.
- C. Formal Human Rights Complaints March 2006 Presented by Jennifer Barker

A motion was made and unanimously passed to accept Mrs. Barker's report. Additionally, the Committee requested additional follow-up in response to an issue involving patient's welfare and protection regarding the appropriate and sanitary use of the cook-chill units by adding another column to the cook chill routine check list to ensure staff are not refrigerating their meals in the cook chill units.

- D. Spit Mask Usage March 2006 Presented by Michael Curseen A Motion was made and unanimously passed to accept Mr. Curseen's report.
- E. Monthly Variance Report for March 2006 Presented by Jim Bell

Mr. Bell reported that there were no reportable incidents involving the four approved forensic variances during the month of March 2006

**Action:** The Committee approved a motion to accept Mr. Bell's report.

F. CSH LHRC Bylaws: Revised Language from SHRC – Presented by Michael Curseen

Mr. Curseen stated that the revised language inserted in the CSH LHRC Bylaws reflect the approved language recommended by the SHRC.

**Action:** The Committee approved a motion to accept the suggested language revisions to the CSH Bylaws recommended by the SHRC.

G. Restrictive Procedure – Locking Bathroom Doors During of Dispensing

## **Medications – Presented by Dr. Ronald Forbes**

Dr. Forbes addressed the Committee concerning a problem with patients who intentionally fail to swallow (cheek) medication and dispose of it in the bathroom when the opportunity presents itself. In an effort to address this concern, Central State Hospital initiated the practice of locking bathroom doors prior to dispensing patient medications. Dr. Forbes explained that patients are notified approximately 10 minutes prior to the locking of bathroom doors to allow access to the bathroom for those patients who may wish to use it. Mrs. Barker explained although the bathroom doors are locked, staff is still posted at the bathroom. This is done so that if a patient asks to use the bathroom during this time they are able. If the patient has been identified as one whom may cheek medication, the staff may ask the patient to wait a little bit longer before leaving the medication dispensing area or request that the patient swishes water in their mouth if they are unable to remain longer. According to Dr. Forbes and Mrs. Barker, during this period, the bathroom doors remain locked for approximately 45 to 60 minutes.

Ms. Cunningham advised the LHRC that the current practice of locking the bathroom doors during the dispensing of patient medications is in violation of the provider's duties governing rules of conduct as referenced in 12 VAC 35-115-100, C.3-4 of the Rules and Regulations since patient input was not solicited prior to the implementation of this practice and because the restriction was neither reviewed nor approved by the LHRC prior to its implementation. Mr. Curseen added that the restriction unfairly places limitations on the movement of those patients who demonstrate compliance with taking prescribed medications in violation of 12 VAC 35-115-100, A.1a of the Rules and Regulations which states that patients are entitled to the freedom to move within the service setting, its grounds and the community.

After further discussion, the LHRC agreed that CSH should adhere to the Rules and Regulations and immediately discontinue the practice of locking bathroom doors during medication dispensation. Dr. Forbes indicated that the hospital would plan to identify those patients suspected of cheeking medication and direct the treatment team to address this issue on a patient by patient basis. Dr. Forbes also plans to recommend a revision to the ward rules for locking the bathroom doors during the dispensing of medications.

**Action:** A motion was made and unanimously passed to recommend that CSH immediately discontinue the practice of locking bathroom doors during the dispensing of medications and requested confirmation that the practice has been discontinued. The LHRC also recommended that CSH address this issue on a patient by patient basis.

# V. Follow-up Business

## (Executive Session)

The committee approved a Motion to move into Executive session pursuant to VA Code 2.2-3711 (A), Paragraph 15, for the protection of the privacy of individuals and their records in personal matters not related to public business.

# The following subject matter was discussed in Executive Session:

Follow-up: Review & Comments on Case # 05-0107

Follow-up: Issues Identified From Spit Guard Usage – February 06

## (Coming out of Executive Session)

Upon reconvening in open session, the Central State Hospital Local Human Rights Committee certified that to the best of each member's knowledge, only public business matters lawfully exempt from statutory open meeting requirements, and only public business matters identified in the motion to convene the closed session were discussed in closed session.

# 1. Follow-Up: Review & Comments on Case # 05-0107

A motion was made and unanimously passed to draft a letter requesting an opinion from the Attorney General's office concerning issues identified on behalf of the Committee.

# 2. Follow-up: Issues Identified From Spit Guard Usage – February 06

A motion was made and unanimously passed to accept this report. The LHRC also requested follow-up concerning an issue identified during discussion concerning J.A.C.

# 3. Freedom of Information Act (FOIA) – Michael Curseen

Mr. Curseen reviewed the Freedom of Information Act (FOIA) requirements with the LHRC. Mr. Curseen placed emphasis on the definition of a public body, the definition of a quorum and the time frames for posting draft minutes and final minutes on an internet website accessible to the public. Mr. Curseen explained that the LHRC, a public body, is required to receive FOIA training on an annual basis.

Action: none.

# VI. Hospital Director's Comments: None

VII. Adjournment: 11:54 am

**Next Meeting Date: May 5, 2006**